



09-22-04

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Colens

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Serial No. 10/030,745

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Art Unit: 3671

Filed: December 14, 2001

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Examiner: Ms. Meredith Petravick

For: DEVICE FOR AUTOMATICALLY
PICKING UP OBJECTS

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AMENDMENT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to the Official Action of April 22, 2004, the time to respond to which has herein been extended by two (2) months to September 22, 2004, please amend the above-identified application as follows:

IN THE CLAIMS

Please amend the claims as follows.

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450



Sir:

Transmitted herewith is an Amendment in the application of:

Inventor: Colens

Serial No. 10/030,745

Filed: December 14, 2001

For: DEVICE FOR AUTOMATICALLY PICKING UP OBJECTS

☒ Small entity status of this application under 37 CFR 1.9 and 1.27 has been established by a verified statement previously submitted.

☐ A verified statement to establish small entity status under 37 CFR 1.9 and 1.27 is enclosed.

☒ No additional fee is required.

The fee has been calculated as shown below:

	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADD. FEE	OR	RATE	ADD. FEE
TOTAL	14	MINUS	** 20	0	x 9	\$ -0-		x 18	\$
INDEP	2	MINUS	*** 3	0	x 43	\$ -0-		x 86	\$
FIRST PRESENTATION OF MULTIPLE DEP. CLAIM					+145	\$		+290	\$
					TOTAL	\$ -0-	OR	TOTAL	\$

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

☐ Please charge my Deposit Account No. 02-2839 in the amount of \$ _____. A duplicate copy of this sheet is enclosed.

☐ A check in the amount of \$ _____ is attached.

☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 02-2839. A duplicate copy of this sheet is enclosed.

☒ Any filing fees under 37 CFR 1.16 for the presentation of extra claims.

☒ Any patent application processing fees under 37 CFR 1.17.

Case Docket No. 21413-PCT-PA
FORM PTO-1083

CERTIFICATE OF TRANSMITTAL

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Date: September 21, 2004

Express Mail Label No. EV520670445US

By: Robert M. Gamson

Robert M. Gamson
Reg. No. 32.986

Sept 21, 2004